

Changing Lives AmeriCorps Member Self-Assessment Training Survey

page 1 of 2

Please rate each training as topics of interest to implement for your Member Development Training throughout your year of service:

1=very interested

2=interested

3=somewhat interested

4=not interested

CORE TRAINING PROGRAM

First Aid/CPR	1_____	2_____	3_____	4_____
Diversity Awareness	1_____	2_____	3_____	4_____
Conflict Resolution	1_____	2_____	3_____	4_____
Computer Skills/Internet	1_____	2_____	3_____	4_____
Reading Skills	1_____	2_____	3_____	4_____
Working With Youth	1_____	2_____	3_____	4_____
Professionalism	1_____	2_____	3_____	4_____
Service Ethic	1_____	2_____	3_____	4_____
AIDS/HIV	1_____	2_____	3_____	4_____
Child Abuse Awareness	1_____	2_____	3_____	4_____
Team Building	1_____	2_____	3_____	4_____
Gang Awareness	1_____	2_____	3_____	4_____
Importance of Evaluation	1_____	2_____	3_____	4_____
Drug-Free Workplace	1_____	2_____	3_____	4_____
Basic AmeriCorps Knowledge	1_____	2_____	3_____	4_____
Citizenship Education	1_____	2_____	3_____	4_____
Safe Vehicle Operation	1_____	2_____	3_____	4_____
Sexual Harassment Awareness	1_____	2_____	3_____	4_____
Personality Profiles	1_____	2_____	3_____	4_____
OSHA Training	1_____	2_____	3_____	4_____

Occupational Safety & Health Administration

Member's Name:_____

Problem Solving 1_____ 2_____ 3_____ 4_____

Environmental Awareness 1_____ 2_____ 3_____ 4_____

PERSONAL DEVELOPMENT

Disaster Preparedness 1_____ 2_____ 3_____ 4_____

Photography 1_____ 2_____ 3_____ 4_____

CPR/First Aid Cert. 1_____ 2_____ 3_____ 4_____

Fitness Evaluation/
Program Development 1_____ 2_____ 3_____ 4_____

Time / Stress Management 1_____ 2_____ 3_____ 4_____

Advanced Computer Skills 1_____ 2_____ 3_____ 4_____

Certified Emergency Response 1_____ 2_____ 3_____ 4_____

Disability Inclusion Training 1_____ 2_____ 3_____ 4_____

Financial Management 1_____ 2_____ 3_____ 4_____

History of Montgomery
and Alabama 1_____ 2_____ 3_____ 4_____

Career Services 1_____ 2_____ 3_____ 4_____

Public Speaking 1_____ 2_____ 3_____ 4_____

Other:_____ 1_____ 2_____ 3_____ 4_____

Other:_____ 1_____ 2_____ 3_____ 4_____

Other:_____ 1_____ 2_____ 3_____ 4_____

What talents/special knowledge do you have:

What areas of training do you feel would be most beneficial to you:

Member's Name:_____